

SENSOR ARRANGEMENT

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S nsor arrang m nt

[0001] The present invention relates to measuring anesthesia parameters from the head of a patient.

[0002] The parameters widely used in anesthesia are Entropy, which is derived from EEG and FEMG signals, and NMT and SpO₂. Currently the Entropy parameter is the only parameter, which is exclusively measured from the head of the patient. SpO₂ is sometimes measured from the ear if extremities cannot be used. So far NMT is mainly monitored from the hand. The parameters mentioned above can be described shortly as follows.

[0003] SpO₂ or pulse oximetry measures the oxygenation of the blood noninvasively. Blood absorbs red and infrared light differently depending on the oxygenation, ie. the colour of the blood varies with its oxygenation. By emitting red and infrared light through tissue and measuring the absorption of the two different wavelengths (red, about 660 nm and infrared, about 940 nm) the blood oxygenation can be calculated. There are two ways of doing this, transmission oximetry or reflectance oximetry. In transmission oximetry the emitter (two LEDs) and receiver (photodetector) are placed facing each other typically on each side of a finger, toe or earlobe. In reflectance oximetry the light is reflected below the tissue (eg. Chest, forehead or limbs) back to the same surface as the emitter. This way both the emitter and receiver can be palced on the same skin surface. These matters are described in "Chemical Biosensors", Peura, R.A., Webster J.G. (ed.), Medical Instrumentation: Application and Design. New York: Wiley, 1998, pp.469-472.

[0004] Neuro Muscular Transmission (NMT) is the transfer of an impulse between a nerve and a muscle in the neuromuscular junction. NMT can be blocked by neuromuscular blocking agents-drugs, which cause transient muscle paralysis and prevent the patient from moving and breathing spontaneously. Muscle relaxation is used during general anesthesia to enable endotracheal intubation and to provide the surgeon with optimal working conditions. The level of neuromuscular block is routinely measured by stimulating a peripheral nerve, usually in the hand, and by evaluating the muscle response. The muscle response can be measured either visually, by touching the hand, using a mechanical piezoelectric sensor or measuring the EMG response (ie. electrical muscle activity). These matters are described in "A Practical Guide to

Monitoring: Neuromuscular Function", Sorin J. Brull et al, Datex-Ohmeda, 2002.

[0005] Neuromuscular transmission can also be measured from the face of the patient by stimulating the facial nerve and observing the response of the facial muscles. These matters are described in the article "Comparison of Neuromuscular Blockade in Upper Facial and Hypothenar Muscles", Paloheimo Markku P.J. et al, Journal of Clinical Monitoring, Vol 4, No 4, Little, Brown and Company, October 1988.

[0006] The entropy parameter is used to determine the level of hypnosis of an anesthetized patient. The Entropy parameter is based on EEG and EMG signals measured from the forehead of the patient. The EEG signal represents brain activity whereas EMG represents muscle activity. Entropy could be described as the level of irregularity in the EEG and EMG signals. When the patient is awake, there is more brain and muscle activity whereas an anesthetized patient has less brain and muscle activity. These matter are described in the PCT-document WO 02/32305 A1.

[0007] A considerable problem in the operating rooms is the large amount of cables and hoses extending from the patient to a patient monitor and other devices connected to the patient. The amount of cables and hoses is due to the fact that traditionally separate sensors have been connected for example to a patient monitor using a cable of its own or a hose of its own. This principle leads to a considerable amount of cables and hoses, which may cause difficulties in the operating rooms particularly in extreme situations.

[0008] The object of the invention is to provide a sensor arrangement by which the problems of the prior art technique can be eliminated. This is obtained by the invention. The basic idea of the invention is that all electrodes and sensors are connected to a single connector or alternatively to a series of connectors for connecting the sensor arrangement to a patient monitor.

[0009] The sensor described herein provides a combination of the basic adequacy of anesthesia parameters into one compact sensor. The sensor gives a significant improvement to the current level of ergonomics and usability. When using the invention the user only has to attach one sensor instead of three separate sensors, Entropy, NMT and SpO2. In addition all parameters are measured from the same area, the face of the patient. There is no need to attach any sensors on the hands of the patient, which would typi-

cally be the case for NMT and SpO₂. The user also only needs to connect one cable to the sensor since all parameters are connected through one connector. Depending on the sensor design, it might be necessary to use separate connectors for some of the parameters to meet patient leakage current and isolation requirements.

[0010] As told above a considerable problem in the operating rooms using the prior art technique is the large amount of cables and hoses extending from the patient to the patient monitor and other devices connected to the patient. The present invention eliminates or at least drastically reduces said problem by combining several parameters into one cable and thereby reducing the "cable clutter".

[0011] Currently the Entropy parameter is the only parameter, which is exclusively measured from the head of the patient. SpO₂ is sometimes measured from the ear if extremities cannot be used. So far NMT is mainly monitored from hand, but in fact the face offers a good alternative location for NMT measurement. Since Entropy can also be measured from the forehead of the patient, the head is a logical location for the combined sensor. The Entropy electrodes are located on the forehead and temple area.

[0012] Electrodes are also used for NMT stimulus and can also be used for NMT measurement (muscle response is measured by measuring the EMG response). To reduce the number of electrodes needed, some of the Entropy and NMT electrodes can be shared between the two parameters. The measurements can then be multiplexed to stimulate and measure potentials for the two different parameters. NMT can be measured either using a mechanical sensor sensing physical muscle movement or using electrodes measuring muscle activity electrically (EMG). Using a mechanical sensor requires a separate piezo-electric sensor over the muscle where the response is to be measured.

[0013] SpO₂ is typically measured from the extremities or from the ear. It is, however, possible to measure SpO₂ anywhere on the body where you can place an optical emitter and detector in such a fashion that the emitted light passes through oxygenated tissue. On the head of the patient such areas are the ears and the nose, and if the light is reflected off the skull, the forehead can be used as well.

[0014] All parameters in the combined adequacy of anesthesia sensor can be reliably recorded from the head of the patient enabling a compact

sensor. It is also possible to evaluate the amount of pain experienced by the patient (analgesia) by monitoring the heartrate and the amplitude of the plethysmographic curve (signal obtained from the SpO2 sensor). The analgesia parameter could also be derived from the SpO2 signal without additional sensors.

[0015] In the following the invention will be described in greater detail by means of the examples shown in the drawings enclosed. The Figures 1 – 11 describe eleven different embodiments of the invention.

[0016] The first embodiment of the invention is described in Figure 1. The sensor arrangement shown in Figure 1 comprises an array of electrodes for measuring EEG, EMG and NMT. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. If location b is used, electrode 4a is also used. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. The International 10-20 system is described in "Monitoring in Anesthesia and Critical Care Medicine", Casey D. Blitt, Churchill Livingstone, 1985. Electrode 5b is located between electrode 4b and electrode 6.

[0017] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a reflective optical sensor 7 for monitoring substances in tissues, e.g. SpO2 is placed on the face of the patient, anywhere where suitable for the structure of the sensor, eg. but not limited to on the forehead above electrode 6. The optical sensor 7 comprises an emitter and a receiver located close to each other. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector.

[0018] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4a and 6 are the NMT recording electrodes and electrode 5 (a or b) is the NMT grounding electrode. Electrodes 4 (a or b) and 6 also record EEG and EMG signals used e.g. to derive the Entropy pa-

rometer. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation.

[0019] The embodiment shown in Figure 1 comprises also a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se.

[0020] All electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 as shown in Figure 1. Instead of a single connector 10 a series of connectors may be used as told before.

[0021] The second embodiment is described in Figure 2. The sensor arrangement shown in Figure 2 comprises an array of electrodes for measuring EEG, EMG and NMT. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. If location b is used, electrode 4a is also used. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0022] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring substances in tissues, e.g. SpO2 is placed on the nose of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of the nose. The emitter comprises LEDs of different wavelengths and the receiver comprises of a photodetector.

[0023] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4a and 6 are the NMT recording electrodes and electrode 5 (a or b) is the NMT grounding electrode. Electrodes 4 (a or b) and 6 also record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. plethysmographic curve, the heartrate and the blood oxygen saturation.

[0024] The embodiment shown in Figure 2 comprises also a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se.

[0025] All electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 as shown in Figure 2. Instead of a single connector 10 a series of connectors may be used as told before.

[0026] The third embodiment is described in Figure 3. The sensor arrangement shown in Figure 3 comprises an array of electrodes for measuring EEG, EMG and NMT. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. If location b is used, electrode 4a is also used. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0027] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring

substances in tissues, e.g. SpO₂ is placed on the ear of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of the auricle. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector.

[0028] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4a and 6 are the NMT recording electrodes and electrode 5 (a or b) is the NMT grounding electrode. Electrodes 4 (a or b) and 6 also record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation.

[0029] The embodiment shown in Figure 3 comprises also a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The base element 9 can be formed and designed freely according to the existing need as shown in the Figures, ie. for example the base element 9 in Figure 3 is slightly different when compared to the base element 9 in Figure 1. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se.

[0030] All electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 as shown in Figure 3. Instead of a single connector 10 a series of connectors may be used as told before.

[0031] The fourth embodiment is described in Figure 4. The sensor arrangement shown in Figure 4 comprises an array of electrodes for measuring EEG, EMG and for NMT stimulus. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either

location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0032] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a reflective optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the face of the patient, anywhere where suitable for the structure of the sensor, eg. but not limited to on the forehead above electrode 6. The optical sensor 7 comprises an emitter and a receiver located close to each other. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector. A mechanical piezoelectric sensor 8 is located over either the procerus, frontalis, corrugator or orbicularis muscle or a combination of these.

[0033] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4 (a or b) and 6 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. the plethysmographic curve, the heart rate and the blood oxygen saturation. The mechanical piezoelectric sensor 8 records muscle response to NMT stimulus.

[0034] Also the embodiment shown in Figure 4 comprises according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0035] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in Figures 1 - 3. Instead of a single connector 10 a series of connectors may be used as told before.

[0036] The fifth embodiment is described in Figure 5. The sensor arrangement shown in Figure 5 comprises an array of electrodes for measuring EEG, EMG and for NMT stimulus. The electrodes are located on the face of

the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0037] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the nose of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of the nose. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector. A mechanical piezoelectric sensor 8 is located over either the procerus, frontalis, corrugator or orbicularis muscle or a combination of these.

[0038] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4 (a or b) and 6 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation. The mechanical piezoelectric sensor 8 records muscle response to NMT stimulus.

[0039] Also the embodiment shown in Figure 5 comprises according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0040] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in Figures 1 - 4. Instead of a single connector 10 a series of connectors may be used as told before in connection with the previous embodiments.

[0041] The sixth embodiment is described in Figure 6. The sensor arrangement shown in Figure 6 comprises an array of electrodes for measuring EEG, EMG and for NMT stimulus. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0042] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the ear of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of either auricle. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector. A mechanical piezoelectric sensor 8 is located over either the procerus, frontalis, corrugator or orbicularis muscle or a combination of these.

[0043] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4 (a or b) and 6 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation. The mechanical piezoelectric sensor 8 records muscle response to NMT stimulus.

[0044] Also the embodiment shown in Figure 6 comprises according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0045] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in Figures 1 – 5. Instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 5.

[0046] The seventh embodiment is described in Figure 7. The sensor arrangement shown in Figure 7 comprises an array of electrodes for measuring EEG, EMG and NMT. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. If location b is used, electrode 4a is also used. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eye-brows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0047] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same.

[0048] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4a and 6 are the NMT recording electrodes and electrode 5 (a or b) is the NMT grounding electrode. Electrodes 4 (a or b) and 6 also record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 3.

[0049] Also the embodiment shown in Figure 7 comprises according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0050] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in Figures 1 – 6. Instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 6.

[0051] The eighth embodiment is described in Figure 8. The sensor arrangement shown in Figure 8 comprises an array of electrodes for measuring EEG, EMG and for NMT stimulus. The electrodes are located on the face of the patient. Electrode 1 is located just posterior to the lower part of the pinna and electrode 2 is located just anterior to the tragus. Electrode 3 is located below the eye. Electrodes 4 and 5 have two alternative locations, a and b. Electrode 4a is located on the temple area between the corner of the eye and the hairline. Electrode 5a is located above the eye at the same level as electrode 6, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 4b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 5b is located between electrode 4b and electrode 6.

[0052] It is very advantageous to place electrode 5b essentially in the middle of electrodes 4b and 6 so that the distances between electrode 5b and electrode 4b, and electrode 5b and electrode 6 are essentially the same. A mechanical piezoelectric sensor 8 is located over either the procerus, frontalis, corrugator or orbicularis muscle or a combination of these.

[0053] Electrodes 1 and 2 are the NMT stimulus electrodes, stimulating the facial nerve. Electrodes 4 (a or b) and 6 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 5 (a or b) is the reference electrode for the EEG and EMG measurements. The EEG and EMG measurement can be enhanced using electrode 3 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or with-

out electrode 3. The mechanical piezoelectric sensor 8 records muscle response to NMT stimulus.

[0054] Also the embodiment shown in Figure 8 comprises according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0055] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in connection with Figures 1 – 7 instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 7.

[0056] The ninth embodiment is described in Figure 9. The sensor arrangement shown in Figure 9 comprises an array of electrodes for measuring EEG and EMG. The electrodes are located on the face of the patient. Electrode 1 is located below the eye. Electrodes 2 and 3 have two alternative locations, a and b. Electrode 2a is located on the temple area between the corner of the eye and the hairline. Electrode 3a is located above the eye at the same level as electrode 4, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 2b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 3b is located between electrode 2b and electrode 4.

[0057] It is very advantageous to place electrode 3b essentially in the middle of electrodes 2b and 4 so that the distances between electrode 3b and electrode 2b, and electrode 3b and electrode 4 are essentially the same. In addition to these electrodes, a reflective optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the face of the patient, anywhere where suitable for the structure of the sensor, for example on the forehead as shown in Figure 9. The optical sensor 7 comprises an emitter and a receiver located close to each other. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector.

[0058] Electrodes 2 (a or b) and 4 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 3 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measure-

ment can be enhanced using electrode 1 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 1. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation.

[0059] The embodiment shown in Figure 9 comprises also according to the invention a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0060] In this embodiment all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in connection with Figures 1 – 8. Instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 8.

[0061] The tenth embodiment is described in Figure 10. The sensor arrangement shown in Figure 10 comprises an array of electrodes for measuring EEG and EMG. The electrodes are located on the face of the patient. Electrode 1 is located below the eye. Electrodes 2 and 3 have two alternative locations, a and b. Electrode 2a is located on the temple area between the corner of the eye and the hairline. Electrode 3a is located above the eye at the same level as electrode 4, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 2b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 3b is located between electrode 2b and electrode 4.

[0062] It is very advantageous to place electrode 3b essentially in the middle of electrodes 2b and 4 so that the distances between electrode 3b and electrode 2b, and electrode 3b and electrode 4 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the nose of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of the nose. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector.

[0063] Electrodes 2 (a or b) and 4 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 3 (a or b) is the reference

electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 1 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 1. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation.

[0064] As told in connection with the previous embodiments also the embodiment shown in Figure 10 comprises a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0065] In the embodiment of Figure 10 all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in connection with Figures 1 – 9. Instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 9.

[0066] The eleventh embodiment is described in Figure 11. The sensor arrangement shown in Figure 11 comprises an array of electrodes for measuring EEG and EMG. The electrodes are located on the face of the patient. Electrode 1 is located below the eye. Electrodes 2 and 3 have two alternative locations, a and b. Electrode 2a is located on the temple area between the corner of the eye and the hairline. Electrode 3a is located above the eye at the same level as electrode 4, which is located between the eyebrows of the patient at the center of the forehead, approximately 4 cm above the nose. Electrode 2b is located at either location F3 or F4 (left or right side) of the International 10-20 system. Electrode 3b is located between electrode 2b and electrode 4.

[0067] It is very advantageous to place electrode 3b essentially in the middle of electrodes 2b and 4 so that the distances between electrode 3b and electrode 2b, and electrode 3b and electrode 4 are essentially the same. In addition to these electrodes, a transmission optical sensor 7 for monitoring substances in tissues, e.g. SpO₂ is placed on the ear of the patient. The optical sensor 7 comprises an emitter and a receiver located on opposite sides of either auricle. The emitter comprises LEDs of different wavelengths and the receiver comprises a photodetector.

[0068] Electrodes 2 (a or b) and 4 record EEG and EMG signals used e.g. to derive the Entropy parameter. Electrode 3 (a or b) is the reference electrode for the EEG and EMG measurement. The EEG and EMG measurement can be enhanced using electrode 1 e.g. but not limited to record eye movements. The EEG and EMG measurement can be done with or without electrode 1. The optical sensor measures e.g. the plethysmographic curve, the heartrate and the blood oxygen saturation.

[0069] As told in connection with the previous embodiments also the embodiment shown in Figure 11 comprises a base element 9. The base element 9 can be made of any appropriate flexible material, for example of plastic material. The electrodes and sensors described above can be attached to the base element by using any appropriate method known per se. As told before the form and the structure of the base element can be designed quite freely according to the existing need.

[0070] In the embodiment of Figure 11 all electrodes and sensors described above are connected to a single connector 10 attached to the base element 9 in the same way as described in connection with Figures 1 – 10. Instead of a single connector 10 a series of connectors may be used as told before in connection with the embodiments shown in Figures 1 – 10.

[0071] In the embodiments shown in Figures 1 – 11 all electrodes and sensors are connected to a single connector 10 for connecting the sensor arrangement to a patient monitor. Said arrangement reduces the amount of cables needed between the patient and the patient monitor. As told above depending on the sensor design it might however be necessary to use separate connectors for some of the parameters, ie. for some of the electrodes used, to meet patient leakage current and isolation requirements. Said separate connectors can be arranged as a compact unit, in which the connectors are placed side by side for example.

[0072] The above embodiments of the invention are by no means intended to limit the invention, but the invention can be modified quite freely within the scope of the claims. Accordingly, it is clear that an embodiment of the invention or its details do not necessarily need to be just as described in the figures, but solutions of other kinds are also possible.